



Solid Waste Permit Application

Chapter 173-350 WAC and Chapter 173-351 WAC

Permit Number
(For official use only)

PART I. General Information

Application Date	County where facility is located
Name of Applicant (see WAC 173-350.715(3) or WAC 173-351-730(7) for appropriate evidence of authority): Company Name, Government Entity, etc.: Applicant's Position in Company or Government Entity:	Applicant is: <input type="checkbox"/> Facility owner <input type="checkbox"/> Facility operator <input type="checkbox"/> Other(specify) _____
Applicant Mailing Address: Street: City: State: Zip:	Applicant phone: Fax: e-mail address:

PART II. Solid Waste Activity/Facility Type

Identify all solid waste handling activities/facilities that are included in this permit application.

(You must complete the applicable PART II forms below for each activity/facility type with this application.)

<input type="checkbox"/> Municipal Solid Waste Landfill Unit per chapter 173-351 WAC <input type="checkbox"/> Composting per WAC 173-350-220 <input type="checkbox"/> Land application per WAC 173-350-230 <input type="checkbox"/> Energy recovery and incineration per WAC 173-350-240 Intermediate solid waste handling per WAC 173-350-310 <input type="checkbox"/> Material recovery facility <input type="checkbox"/> Transfer station <input type="checkbox"/> Bailing and compaction site <input type="checkbox"/> Drop Box <input type="checkbox"/> Piles used for storage or treatment per WAC 173-350-320	<input type="checkbox"/> Surface impoundment per WAC 173-350-330 <input type="checkbox"/> Tank per WAC 173-350-330 <input type="checkbox"/> Waste tire storage per WAC 173-350-350 <input type="checkbox"/> Moderate risk waste per WAC 173-350-360 <input type="checkbox"/> Limited purpose landfill per WAC 173-350-400 <input type="checkbox"/> Inert waste landfill per WAC 173-350-410 <input type="checkbox"/> Other per WAC 173-350-490 (specify) _____ _____
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Municipal Solid Waste Landfill Unit

Attach the following as required under WAC 173-351-730	Location of Documents
Engineering plans, reports and specifications per WAC 173-351-730(5)(a)	
Demonstrations that the facility meets the location standards of WAC 173-351-130 and 173-351-140	
Hydrogeologic report and water quality monitoring plan, and demonstrations, prepared in accordance with WAC 173-351-400	
A plan of operations, and demonstrations, meeting the requirements of WAC 173-351-200, 173-351-210 and 173-351-220	
An engineering report comprehensively describing the existing site conditions and an analysis of the facility, including closure, post-closure criteria and any necessary demonstrations per WAC 173-351-730(5)(b)	

An engineering report containing a description of the existing site conditions and an analysis of the proposed facility per WAC 173-351-730(5)(c)	
A construction quality assurance and quality control plan per WAC 173-351-730(6)	
Closure and post-closure plans per WAC 173-351-500	
Documentation per WAC 173-351-730(1)((b)(viii) for managing leachate	
For small landfills, demonstration of WAC 173-351-010(2)(c)	NA <input type="checkbox"/>
Demonstration of how the facility conforms with the approved local comprehensive solid waste management plan	
Additional information required by the jurisdictional health department	

Composting Facilities

Attach the following as required under WAC 173-350-220(8):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-220(3)	
A plan of operation meeting the requirements of WAC 173-350-220(4)	
A closure plan meeting the requirements of WAC 173-350-220(6)	
Additional information required by the jurisdictional health department	

Land Application

Attach the following as required under WAC 173-350-230(8):	Location of Documents
Contact information as required under WAC 173-350-230(8)(a)(i)	
Statement of intended use as required under WAC 173-350-230(8)(a)(ii)	
Analysis of <u>each</u> waste stream as required under WAC 173-350-230(8)(a)(iii)	
A comprehensive site characterization as required under WAC 173-350-230(8)(a)(iv)	
A plan of operation meeting the requirements of WAC 173-350-230(4)	
Additional information required by the jurisdictional health department	

Energy Recovery and Incineration Facilities

Attach the following as required under WAC 173-350-240(9):	Location of Documents
Engineering reports/plans and specifications that address the design of storage and handling facilities on-site for incoming waste as well as fly ash, bottom ash and any other waste produced by air or water pollution controls	
Engineering reports/plans and specifications that address the design of the incinerator or thermal treater, including charging or feeding systems, combustion air systems, ash handling systems, and air pollution and water pollution control systems. Include design of instrumentation and monitoring systems.	
A plan of operation meeting the requirements of WAC 173-350-240(4)	
A closure plan meeting the requirements of WAC 173-350-240(6)	

Additional information required by the jurisdictional health department	
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Intermediate Solid Waste Handling Facilities (Material Recovery Facility, Transfer Station, Baling and Compaction Site)

Attach the following as required under WAC 173-350-310(9):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-310(4)(a)	
A plan of operation meeting the requirements of WAC 173-350-310(5)	
A closure plan meeting the requirements of WAC 173-350-310(7)	
Additional information required by the jurisdictional health department	

Intermediate Solid Waste Handling Facilities (Drop Boxes)

Attach the following as required under WAC 173-350-310(9):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-310(4)(b)	
A plan of operation meeting the requirements of WAC 173-350-310(5)	
A closure plan meeting the requirements of WAC 173-350-310(7)	
Additional information required by the jurisdictional health department	

Piles for Treatment and Storage

Attach the following as required under WAC 173-350-320(8):	Location of Documents
The design of fire control features	
Engineering reports/plans and specifications that address the design standards of WAC 173-350-320(3)	
A plan of operation meeting the requirements of WAC 173-350-320(4)	
A closure plan meeting the requirements of WAC 173-350-320(6)	
Additional information required by the jurisdictional health department	

Surface Impoundments and Tanks

Attach the following as required under WAC 173-350-330(8):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-330(3)	
A plan of operation meeting the requirements of WAC 173-350-330(4)	
For surface impoundments not equipped with a leak detection layer, hydrogeologic reports and plans that address the requirements of WAC 173-350-330(5)	
A closure plan meeting the requirements of WAC 173-350-330(6)	

Additional information required by the jurisdictional health department	
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Waste Tire Storage

Attach the following as required under WAC 173-350-350(10):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-350(5)	
A plan of operation meeting the requirements of WAC 173-350-350(6)	
A closure plan meeting the requirements of WAC 173-350-350(8)	
Documentation as needed to meet the financial assurance requirements of WAC 173-350-350(9)	
Additional information required by the jurisdictional health department	

Moderate Risk Waste Handling Facility

Attach the following as required under WAC 173-350-360(10):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-360(5)	
A plan of operation meeting the requirements of WAC 173-350-360(6)	
A closure plan meeting the requirements of WAC 173-350-360(8)	
Documentation as needed to meet the financial assurance requirements of WAC 173-350-360(9)	
Additional information required by the jurisdictional health department	

Limited Purpose Landfills

Attach the following as required under WAC 173-350-400(9):	Location of Documents
Demonstrations that the facility meets the location standards of WAC 173-350-400(2)	
Documentation that owners of property located within 1,000 feet of facility boundary have been notified that the proposed facility may impact their ability to construct water supply wells, in accordance with Chapter 173-160 WAC, Minimum Standards for Construction and Maintenance of Wells.	
Engineering reports/plans and specifications that address the design standards of WAC 173-350-400(3)	
A plan of operation meeting the requirements of WAC 173-350-400(4)	
Hydrogeologic reports and plans that address the requirements of WAC 173-350-400(5)	
A closure plan meeting the requirements of WAC 173-350-400(6)	
A post-closure plan meeting the requirements of WAC 173-350-400(7)	
Documentation as needed to meet the financial assurance requirements of WAC 173-350-400(8)	
Additional information required by the jurisdictional health department	

Inert Waste Landfill

Attach the following as required under WAC 173-350-410(8):	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-410(3)	
A plan of operation meeting the requirements of WAC 173-350-410(4)	
Documentation that all owners of property located within 1,000 feet of facility boundary have been notified that the proposed facility may impact their ability to construct water supply wells, in accordance with Chapter 173-160 WAC, Minimum Standards for Construction and Maintenance of Wells.	
Additional information required by the jurisdictional health department	

PART III. Facility Information

Name of Facility				
Facility Address: Street: City: State: Zip:	Facility Mailing Address (if different) Street: City: State: Zip:			
Responsible Official: Position at Facility:	Facility phone: Fax: e-mail address:			
Facility Location (at front gate)				
Section	Township	Range	Latitude	Longitude
Location Description				
Legal Description of Site				
Property Tax Account Number(s)		Facility Site Zoning		
<input type="checkbox"/> For a facility/activity to be permitted under chapter 173-350 WAC, attach a vicinity plan or map per WAC 173-350-715 (d) <input type="checkbox"/> For a facility permitted under chapter 173-351 WAC, attach a vicinity plan or map per WAC 173-351-730(5)(a)(iii)(B)				

Required or Existing Permits at the Facility Site

Type of permit (check box)	Need to Obtain	Existing Permit		
		Regulating Authority	Permit #	Expiration Date
<input type="checkbox"/> Solid waste permit				
<input type="checkbox"/> NPDES permit				

<input type="checkbox"/> Biosolids permit				
<input type="checkbox"/> State waste discharge permit				
<input type="checkbox"/> Conditional use permit				
<input type="checkbox"/> Stormwater permit				
<input type="checkbox"/> Hydraulic permit				
<input type="checkbox"/> DNR Surface mining permit				
<input type="checkbox"/> Flood control permit				
<input type="checkbox"/> Fire permit				
<input type="checkbox"/> Wetlands permit				
<input type="checkbox"/> Air operating permit				
<input type="checkbox"/> DNR Forest Practices				
<input type="checkbox"/> Other				
<input type="checkbox"/> Other				

Attach evidence of compliance with chapter 197-11 WAC, SEPA rules

Check any of the following operations that are currently at the facility site

<input type="checkbox"/> Municipal solid waste landfill per chapter 173-351 WAC	<input type="checkbox"/> Surface impoundment per WAC 173-350-330
<input type="checkbox"/> Recycling facility per WAC 173-350-210	<input type="checkbox"/> Tank per WAC 173-350-330
<input type="checkbox"/> Composting per WAC 173-350-220	<input type="checkbox"/> Waste tire storage per WAC 173-350-350
<input type="checkbox"/> Land application per WAC 173-350-230	<input type="checkbox"/> Moderate risk waste per WAC 173-350-360
<input type="checkbox"/> Energy recovery and incineration per WAC 173-350-240	<input type="checkbox"/> Limited MRW per WAC 173-350-360
Intermediate solid waste handling per WAC 173-350-310	<input type="checkbox"/> Limited purpose landfill per WAC 173-350-400
<input type="checkbox"/> Material recovery facility	<input type="checkbox"/> Inert waste landfill per WAC 173-350-410
<input type="checkbox"/> Transfer station	<input type="checkbox"/> Other per WAC 173-350-490 (specify) _____
<input type="checkbox"/> Bailing and compaction site	
<input type="checkbox"/> Drop Box	
<input type="checkbox"/> Piles used for storage or treatment per WAC 173-350-320	

PART IV. Additional Contact Information

Facility Owner(s)

(attach additional sheets if more than one facility owner)

Responsible Official:	Contact Name: (if different)
Company Name, Government Entity, etc.:	
Applicant's Position in Company or Government Entity:	
Contact Mailing Address: Street: City: State: Zip:	Contact phone: Fax: e-mail address:

Facility Operator(s) Same as Facility Owner(s) YES

(attach additional sheets if more than one facility operator)

Responsible Official:	Contact Name: (if different)
Company Name, Government Entity, etc.:	
Applicant's Position in Company or Government Entity:	
Contact Mailing Address: Street: City: State: Zip:	Contact phone: Fax: e-mail address:
Property Owner(s) Same as Facility Owner(s) <input type="checkbox"/> YES (attach additional sheets if more than one property owner)	
Property Owners Name(s):	Contact Name:(if different)
Mailing Address: Street: City: State: Zip:	Phone: Fax: e-mail address:

PART V. Signature and Verification of Applicant

(Refer to WAC 173-350.715(3) or WAC 173-351-730(7) for appropriate evidence of authority)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

(Applicant's Signature – printed)

(Title)

(Applicant's Signature)

(Date)

PART VI. Notary Public Verification

State of _____

County of _____

Signed or attested before me on _____

by _____

(Signature)

(seal or stamp)

My appointment expires:

(Date)

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For persons with a speech or hearing impairment call 711 for relay service or 800-833-6388 for TTY.